## FEC FORM 2

## STATEMENT OF CANDIDACY

								_	
1.	(a) Name of Candidate (in full)								
_	Forde, Brian, , ,								
	(b) Address (number and street) ☐ Check if address 2913 EL CAMINO REAL #616					2. Candidate's FEC Identification Number H8CA45189			
	(c) City, State, and ZIP Code					3. Is This No		d	
	Tustin		CA	9278	2	Statement (N	) OR (A)		
4.	Party Affiliation	5. Office Soug	jht		6. State & Dist	rict of Candidate		_	
	DEMOCRATIC PARTY	House			CA	45			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
(a) Name of Committee (in full) BRIAN FORDE FOR CONGRESS									
	(b) Address (number and street) 4521 CAMPUS DR #396								
	(c) City, State, and ZIP Code								
	IRVINE				CA	92612			
DESIGNATION OF OTHER AUTHORIZED COMMITTEES  (Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.									
NOTE: This designation should be filed with the principal campaign committee.									
(a) Name of Committee (in full)									
(b) Address (number and street)									
	(c) City, State, and ZIP Code								
		mined this Sta	tement and to	the best of	my knowledge a	nd belief it is true, correct	and complete.		
Si	gnature of Candidate					Date		•	
Fe	orde, Brian, , ,			[Elec	tronically Filed]	05/20/2022			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									
$\Box$							J		

FEC FORM 2 (REV. 02/2009)